

## Town of Wyoming LANDLORD RENTAL

## License Application

Valid October 1, 2017 thru September 30, 2018

The undersigned applicant, as the authorized owner and or agent, hereby makes an application in accordance with Ordinance #10-7 and all Amendments of the Town of Wyoming.

## **HOMEOWNER CONTACT INFORMATION:**

Name:			
Address:		City/State/Zip:	
Telephone: Home:	Cell:	Other:	
PROPERTY MANAGER	/ CARETAKER CO	NTACT INFORMATION:	
Name:			
Address:		City/State/Zip:	
Telephone: Home:	Cell:	Other:	
	00 for first rental unit a	and \$25 for each additional rental unit all license fees not received by 09/30/17.	
Address:		Lease Expiration Date:	
Address:		Lease Expiration Date:	
Address:		Lease Expiration Date:	
Address:		Lease Expiration Date:	
		Lease Expiration Date:ase write on back of this form.	
<del>`</del>		tental Inspections has been adopted and in effect. bleted during a vacancy, not to exceed once a year.	
		y legal fees will be added to your B) of the Town of Wyoming Charter	
My signature indicates that I am	in compliance with Town of	of Wyoming Charter and all Ordinances.	
Owner's Signature:		Date:	
	For Office U	Jse Only:	
Town Clerk/Notary	Signature:	Date:	

Date Paid: \_\_\_\_\_Payment Method & #:\_\_\_\_\_ Amount: \_\_\_\_\_ License#: LL \_\_\_\_\_